

# Work Order ID 91784

**\*91784\***

Page 1

October-18-12 1:53:27 PM

Item ID: D4071-041

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Shoulder Harness Assembly

Start Date: 18/10/2012 Start Qty: 8.00

**\*8\***

Cust Item ID:

Required Date: 01/11/2012 Req'd Qty: 8.00

**\*8\***

Customer:

Reference:

Approvals: Process Plan: MCS Date: 12-10-12 Tooling:

Date:

Run Start **\*NR1\***

QC: Date: SPC (Y/N):

Date:

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
<b>Draw Nbr</b>	<b>Revision Nbr</b>								
D4071	A								
100		0.00							
<b>*100*</b>									
Purchasing	Memo	0.00							
Purchasing	Issue P/O: <u>18166</u> Manufacture D4071-041 as per Dwg D4071 Supplier: AMSAFE INC. Certificate of conformity is required								
110	Receive & Inspect for Damage & Mat'l Certs	0.00							
<b>*110*</b>									
Packaging	Memo	0.00							
Packaging									
120	QC6- Inspect dimensions to drawing	0.00							
<b>*120*</b>									
QC	Memo	0.00							
Quality Control									

12-10-10

12/11/12

8

DAS  
15  
12/11/26

DAS  
16  
12/11/27

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
<b>Landing Gear</b>			<b>General</b>						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong						
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other					
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

# Work Order ID 91784

**\*91784\***

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Item ID: D4071-041

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Shoulder Harness Assembly

Start Date: 18/10/2012 Start Qty: 8.00

**\*8\***

Cust Item ID:

Required Date: 01/11/2012 Req'd Qty: 8.00

**\*8\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***  
Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: <u>ST</u>	0.00							
<b>*130*</b>									
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
<b>*140*</b>									
QC	Memo	0.00							
Quality Control									

12/14/27 (8)

12/11/28 JF

12-11-27

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Picklist Print

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Page 1

Work Order ID: 91784

\*91784\*

Parent Item: D4071-041

\*D4071-041\*

Parent Item Name: Shoulder Harness Assembly

Start Date: 18/10/2012

Required Date: 01/11/2012

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP Rev:A new issue DD 10.04.23 verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
4147-2-041-2396		Purchased	No			110	Each	0.0000	1	8			
*4147-2-041-2396*									**				
Shoulder Harness, 4 poiint													

10/24/12 (8)

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

### FAULT CATEGORY

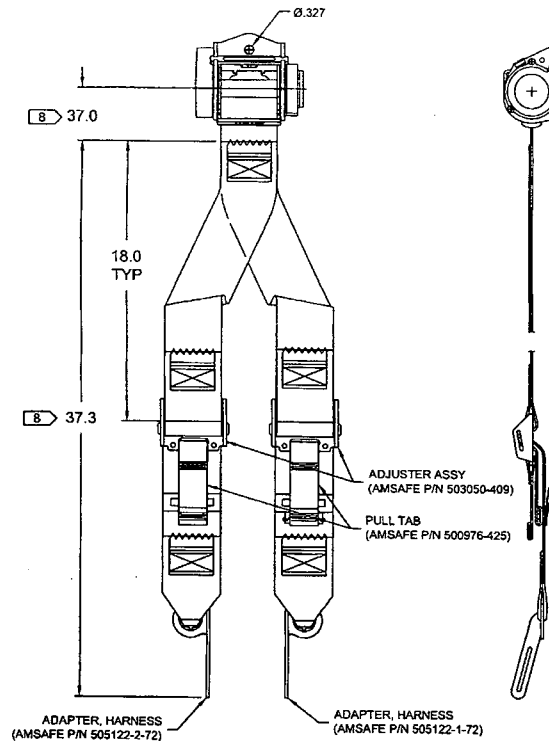
Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# SPECIFICATION CONTROL DRAWING

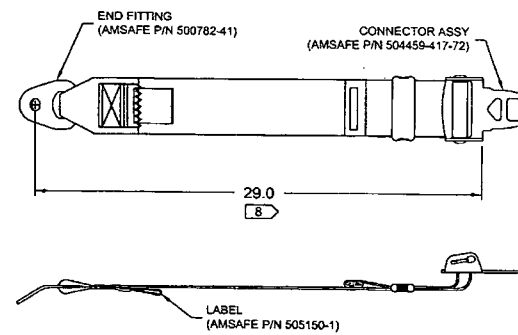
SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE

WORK ORDER  
NO. 91784 MLJ

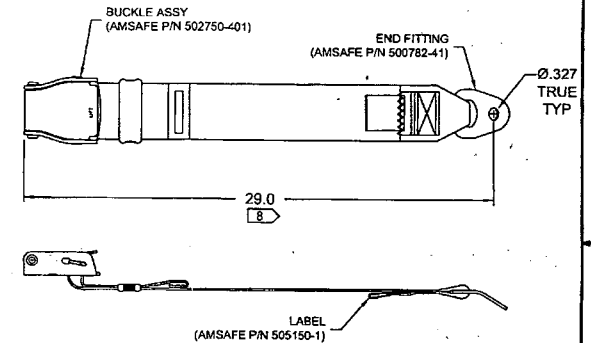
12-10-18



**D4071-041 SHOULDER HARNESS ASSY**  
SHOULDER HARNESS DETAIL  
(AMSAFE SUB-ASSY P/N 4147-2070412396)



**CONNECTOR HALF ASSY**  
(AMSAFE SUB-ASSY P/N 4147-2030412396)



**BUCKLE HALF ASSY**  
(AMSAFE SUB-ASSY P/N 4147-2010412396)

**D4071-041 SHOULDER HARNESS ASSY**  
LAP BELTS DETAIL

**RELEASED**  
2010-04-19  
JMP

## NOTES:

- 1) PURCHASE: AMSAFE INC. PART No. 4147-2-041-2396  
4 POINT SHOULDER HARNESS.  
MEETS REQUIREMENTS OF FAA TSO-C114
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 EXCEPT DIMENSIONS: X.X ±0.50
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: LABEL TO CONTAIN THE FOLLOWING AT MINIMUM:  
P/N 4147-2-041-2396  
CUST P/N: D4071-041  
DATE OF MFG  
CONFORMS TO FAA TSO-C114
- 7) WEIGHT: 2.2 lbs
- 8) INDICATED DIMS ARE FULLY EXTENDED LENGTH.

A		NEW ISSUE		JPH		10.04.13	
REV.		DESCRIPTION		BY		DATE	
DESIGN	JPH	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA				REV. A SHEET 1 OF 1	
DRAWN	JPH						
CHECKED	JPH	DRAWING NO. D4071					
MFG. APPR.	N/A						
APPROVED	JMP	TITLE				SCALE	
DE APPR.	JMP	SHOULDER HARNESS ASSY (D350-689) NTS					
DATE	10.04.13	COPYRIGHT © 2010 BY DART AEROSPACE LTD				THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO18166

Purchase Order Date 10/18/2012

PO Print Date 10/18/2012

Page Number 1 of 1

Order From :

VU-AMS001

AMSAFE INC.  
LOCKBOX #911928  
P.O. BOX 31001-1928

PASADENA, CA 91110-1928  
US

Contact Name

Vendor Phone

Vendor Fax

Vendor Account Nbr

602 850 2850

602 850 2812

Buyer

Requisition Nbr

Tax Resale Nbr

Terms

Currency

FOB

Brigitte Golden

10127-2607

Net 30

USD

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FAXED**  
10/18/12

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	4147-2-041-2396 SMD	Shoulder Harness, 4 point	11/9/2012 Yes	8.00 Each	FedEx PI collect	\$295.9600	\$2,367.68

Special Inst: As per DWG: D4071 Rev: A  
B91784

PO Total:

\$2,367.68

**CERTIFICATE OF CONFORMITY  
REQ'D UPON DELIVERY**

Change Nbr:

1

Change Date: 10/18/2012

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required - YES NO



# AmSafe

1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

## INVOICE

Please remit to:  
AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\* DUPLICATE \*\*\*

Customer No.	Invoice Date	Sales Order Number	Invoice Number	Purchase Order Number	Page No.
10006113	11/15/12	S242897	I285028	PO18166	1

**BILL TO:** DART AEROSPACE  
1270 ABERDEEN STREET  
HAWKESBURY, ON K6A 1K7  
Canada

**SHIP TO:** DART AEROSPACE LTD.  
1270 ABERDEEN ST  
HAWKESBURY,, ON K6A 1K7  
Canada

**SOLD TO:** DART AEROSPACE  
1270 ABERDEEN STREET  
HAWKESBURY, ON K6A 1K7  
Canada

**REMARKS:**  
1517-9324-0

**COMMENTS:**

Freight

COLLECT

TERMS	ORDER DATE	SALESPERSON	SHIP DATE	SHIP VIA	FedEx P1 10:30 AM	FOB POINT
NET30	10/18/12	HEITZMAN	11/15/12	TRACKING #	543084348984	ORIGIN

LINE NO.	ITEM	DESCRIPTION	UM	QUANTITY			T A X	UNIT PRICE	EXTENDED AMOUNT
				LOT	BACK ORD	SHIPPED			
1	4147-2-041-2396 <i>Smb</i>	DRAWING: 4147 REV: H Customer P/N: D4071-041 REST SYS ASSY	EA		S242897-1	0.0	8.0 N	295.96 USD	2,367.68 USD
								TSO-C114	

*5/12/14/23*

Non-Taxable: 2,367.68 USD

Line Total: 2,367.68 USD

Total Taxable:

The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.

Signature: *Jesse Ochida* Date: *NOV 15 2012* Phoenix, Arizona, USA

Sales Tax: Total: 2,367.68 USD

1. Approving National Aviation Authority/Country: FAA/United States		2. <b>AUTHORIZED RELEASE CERTIFICATE</b> FAA Form 8130-3, AIRWORTHINESS APPROVAL TAG				3. Form Tracking Number: <i>S242897-1-ER</i>	
4. Organization Name and Address: AMSAFE, INC 1043 NORTH 47 <sup>TH</sup> AVE PHOENIX, AZ. 85043 PT1967NM						5. Work Order/Contract/Invoice Number: S242897-1 0 PAGES ATTACHED	
6. Item:	7. Description:	8. Part Number:	9. Eligibility: *	10. Quantity:	11. Serial/Batch Number:	12. Status/Work:	
1	REST SYS ASSY	4147-2-041-2396	N/A	8	A1012	NEW	
13. Remarks: DRAWING: 4147 REV: H TSO: C114 CUSTOMER P/N D4071-041  EXPORT AIRWORTHINESS APPROVAL: THIS ARTICLE MEETS THE SPECIAL REQUIREMENTS OF CANADA							
14. Certifies the items identified above were manufactured in conformity to:  <input checked="" type="checkbox"/> Approved design data and are in a condition for safe operation. <input type="checkbox"/> Non-approved design data specified in Block 13.				19. <input checked="" type="checkbox"/> 14 CFR 43.9 Return to Service <input type="checkbox"/> Other regulation specified in Block 13 Certifies that unless otherwise specified in Block 13, the work identified in Block 12 and described in Block 13 was accomplished in accordance with Title 14, Code of Federal Regulations, part 43 and in respect to that work, the items are approved for return to service.			
15. Authorized Signature: <i>Eleanor Arteaga</i>		16. Approval/Authorization No.: ODA 602112NM		20. Authorized Signature:		21. Approval/Certificate No.:	
17. Name (Typed or Printed): ELEANOR ARTEAGA		18. Date (m/d/y): NOV/15/2012		22. Name (Typed or Printed):		23. Date (m/d/y):	
<b>User/Installer Responsibilities</b>							
<p>It is important to understand that the existence of this document alone does not automatically constitute authority to install the part/component/assembly.</p> <p>Where the user/installer performs work in accordance with the national regulations of an airworthiness authority different than the airworthiness authority of the country specified in Block 1, it is essential that the user/installer ensures that his/her airworthiness authority accepts parts/components/assemblies from the airworthiness authority of the country specified in Block 1.</p> <p>Statements in Blocks 14 and 19 do not constitute installation certification. In all cases, aircraft maintenance records must contain an installation certification issued in accordance with the national regulations by the user/installer before the aircraft may be flown.</p>							